

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	ER	TC 823	1-26-01
RESPONSE FORMALITY REVIEW	M.H.	625	02-09-01
			03-06-01

09748609

INDEX OF CLAIMS

✓ Rejected
= Allowed
- (Through numeral)..... Canceled
+ Restricted
N Non-elected
I Interference
A Appeal
O Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
staple additional sheet here

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